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22141 U.S. PTO  
10/780456  
021704

**PATENT**

Attorney Docket No. **RMC-6673**

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**NEW APPLICATION TRANSMITTAL**

Transmitted herewith for filing is the patent application of Inventor(s): **John C. Quigley**

For (title): **METHOD AND APPARATUS FOR PROCESSING A TUBE**

**Enclosed are:**

**1. Papers Required for Filing Date Under 37 CFR 1.53(b):**

- 59** Pages of specification
- 01** Pages Abstract
- 19** Pages of claims
- 12** Sheets of drawing
- ☒ formal (Figs. 1-17)
- ☐ informal

In addition to the above papers there is also attached: **Information Disclosure Statement & PTO-1449 Form**

**CERTIFICATION UNDER 37 CFR 1.10**

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date **February 17, 2004** in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number **EU516995683US** addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

**Lisa D. Jones**

(Type or print name of person mailing paper)

*Lisa D. Jones*  
(Signature of person mailing paper)

**2. Declaration or oath:**

- ☒ Enclosed (Executed)  
☐ Not Enclosed.

**3. Language:**

- ☒ English  
☐ Non-English  
☐ A verified English translation of the  
☐ specification and claims  
☐ declaration  
is attached.

**4. Assignment:**

- ☐ An assignment of the invention to \_\_\_\_\_  
\_\_\_\_\_  
☐ is attached.  
☐ will follow

**5. Certified Copy:**

Certified copy (ies) of application (s)

(Country)	(Appln. No.)	(Filed)
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(Country)	(Appln. No.)	(Filed)
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(Country)	(Appln. No.)	(Filed)
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from which priority is claimed

- ☐ is attached  
☐ will follow

6. **Fee Calculation:**

(Small entity filing fee is 50% normal fee)

CLAIMS AS FILED					
Number Filed		Number Extra	Rate		Basic Fee
					<b>\$ 385.00</b>
Total Claims	<b>53</b>	-20 =	<b>33</b>	X \$ 9.00	<b>297.00</b>
Independent Claims	<b>06</b>	- 3 =	<b>03</b>	X \$ 43.00	<b>129.00</b>
Multiple dependent claim(s), if any				+ \$145.00	

- ☐ Amendment canceling extra claims enclosed  
☐ Amendment deleting multiple dependencies enclosed  
☐ Fee for extra claims is not being paid at this time

Filing Fee Calculation **\$811.00**

7. **Small Entity Statement**

- ☒ The present application is being filed by or on behalf of a **small entity** as defined in 37 CFR 1.9 and 1.27 for purposes of paying reduced fees.

8. **Fee Payment Being Made At This Time:**

Enclosed:

- ☒ basic filing fee **\$811.00**  
☐ assignment recordal fee \$\_\_\_\_\_  
☐ for processing an application with a specification in a non-English language \$\_\_\_\_\_

**Total fees enclosed \$811.00**

9. **Method of Payment Fees:**

- ☒ check in the amount of **\$811.00** enclosed.  
☐ The Commissioner is hereby authorized to charge any **DEFICIENCY** in the filing fees for this application to our Deposit Account No. 20-0090.

10. **Instructions As to Overpayment:**

- ☒ refund

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SIGNATURE OF ATTORNEY, REG. NO. 20,177

Thomas L. Tarolli  
Type or print name of attorney